<table>
<tr><td rowspan="6">

REVOCATION OF POWER OF ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS

</td><td>Application No.</td><td>10/814,729</td></tr>
<tr><td>Filing Date</td><td>March 30, 2004</td></tr>
<tr><td>First Named Inventor</td><td>Kha H. Nguyen</td></tr>
<tr><td>Group Art Unit</td><td>2416</td></tr>
<tr><td>Examiner Name</td><td>Xavier S. Wong</td></tr>
<tr><td>Attorney Docket Number</td><td>2717P185</td></tr>
</table>

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with Customer Number: **45220**

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: **08791**

OR

<table>
<tr><td>☐ Firm or Individual Name</td><td colspan="5"></td></tr>
<tr><td>Address</td><td colspan="5"></td></tr>
<tr><td>Address</td><td colspan="5"></td></tr>
<tr><td>City</td><td></td><td>State</td><td></td><td>Zip Code</td><td></td></tr>
<tr><td>Country</td><td>Telephone</td><td></td><td></td><td>Fax</td><td></td></tr>
</table>

I am the:

☐ Applicant.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under of 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

<table>
<tr><td>Name</td><td>Diane Honda - Extreme Networks VP, General Counsel & Secretary</td></tr>
<tr><td>Signature</td><td></td></tr>
<tr><td>Date</td><td>4.8.10.</td></tr>
</table>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Based on PTO/SB/82 (04-05) as modified by BSTZ (11/30/2005 - WLR)
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.